

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																
1 Date of Request: <u>08/25/06</u>				2 Serial/Patent # <u>09/933,956</u>												
3 Please refund the following fee(s):				4 PAPER NUMBER	5 DATE FILED	6 AMOUNT										
	Filing					\$										
	Amendment					\$										
X	Extension of Time					\$ 1,020.00										
	Notice of Appeal/Appeal					\$										
	Petition					\$										
	Issue					\$										
	Cert of Correction/Terminal Disc.					\$										
	Maintenance					\$										
	Assignment					\$										
	Other					\$										
				7 TOTAL AMOUNT OF REFUND		\$ 1,020.00										
				8 TO BE REFUNDED BY:												
10 REASON:				Treasury Check												
	Overpayment			X	Credit Deposit A/C #:											
	Duplicate Payment			9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">0</td> <td style="width: 20px;">3</td> <td style="width: 20px;">--</td> <td style="width: 20px;">1</td> <td style="width: 20px;">9</td> <td style="width: 20px;">5</td> <td style="width: 20px;">2</td> </tr> </table>						0	3	--	1	9	5	2
0	3	--	1	9	5	2										
X	No Fee Due (Explanation):															
The extension of time period is over; therefore, no extension fee is due.																
11 REFUND REQUESTED BY:																
TYPED/PRINTED NAME: <u>Irvin Dingle</u>				TITLE: <u>Paralegal</u>												
SIGNATURE: <u><i>Irvin Dingle</i></u>				PHONE: <u>571-272-3210</u>												
OFFICE: <u>Office of Petitions</u>																
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****																
APPROVED: <u><i>CKH</i></u>				DATE: <u>8/28/06</u>												

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 324212009600																									
Application Number 09/933,956		Filed August 21, 2001																									
For METHOD AND SYSTEM OF INTERPRETING AND PRESENTING WEB CONTENT USING A VOICE BROWSER																											
Art Unit 2655		Examiner J. Wozniak																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="1"><thead><tr><th></th><th><u>Fee</u></th><th><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$120</td><td>\$60</td><td>\$</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$450</td><td>\$225</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$1020</td><td>\$510</td><td>\$ 1,020.00</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$1590</td><td>\$795</td><td>\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$2160</td><td>\$1080</td><td>\$</td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u>. I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>51,230</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number acting under 37 CFR 1.34 _____</p> <p><u>Michael S. Garrabrants</u> <u>May 5, 2006</u> Signature Date</p> <p><u>Michael S. Garrabrants</u> <u>(415) 268-6824</u> Typed or printed name Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted. 05/09/2006 SDENBOB1 00000048 031952 09933956 03 FC:1253 1020.00 DA</p>					<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 1,020.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 731513874 US, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: May 5, 2006	Signature: <u>Laura Tsang</u> (Laura Tsang)

sf-2125341

Adjustment date: 08/28/2006 CKHLOK
05/09/2006 SDENBOB1 00000048 031952 09933956
03 FC:1253 1020.00 CR